

**Application Data Sheet****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	SAMPLE-HOLDER FOR DRAW AND HUMIDITY MEASUREMENT OF POROUS OBJECTS
Attorney Docket Number::	CHOLET2
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	1
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
<b>Applicant Information</b>	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	France
Status::	Full Capacity

Given Name:: Georges  
Middle Name::  
Family Name:: CHOLET  
Name Suffix::  
City of Residence:: Ormes  
State or Province of Residence::  
Country of Residence:: France  
Street of Mailing Address:: 11 rue Mathurin Regnier  
City of Mailing Address:: Ormes  
State or Province of Mailing Address::  
Country of Mailing Address:: France  
Postal or Zip Code of Mailing Address:: F-45140  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: France  
Status:: Full Capacity  
Given Name:: Jean-Remi  
Middle Name::  
Family Name:: POULET  
Name Suffix::  
City of Residence:: Fleury Les Aubrais  
State or Province of Residence::  
Country of Residence:: France  
Street of Mailing Address:: 20 rue Carnot  
City of Mailing Address:: Fleury Les Aubrais  
State or Province of Mailing Address::  
Country of Mailing Address:: France  
Postal or Zip Code of Mailing Address:: F-45400  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: France  
Status:: Full Capacity  
Given Name:: Gwennael  
Middle Name::  
Family Name:: VERSTICHEL

**Name Suffix::****City of Residence::**

Amilly

**State or Province of Residence::****Country of Residence::**

France

**Street of Mailing Address::**

490 rue Peynault

**City of Mailing Address::**

Amilly

**State or Province of Mailing Address::****Country of Mailing Address::**

France

**Postal or Zip Code of Mailing Address::**

F-45200

**Correspondence Information****Correspondence Customer Number::**

001444

**Representative Information****Representative Customer Number::**

001444

**Domestic Priority Information****Application::**      **Continuity Type::**

Parent

Parent Filing

**Application::****Date::**

This Application

National Stage of

PCT/FR03/003596

12/04/03

**Foreign Priority Information****Country::****Application Number::****Filing Date::****Priority Claimed::**

France

02/16254

12/18/02

Yes

**Assignment Information****Assignee Name::**

Societe Nationale D'Exploitation

Industrielle des Tabacs et Allumettes

(S.E.I.T.A.)

**Street of Mailing Address::**

182-188 Avenue de France

**City of Mailing Address::**

Paris

**State or Province of Mailing Address::****Country of Mailing Address::**

France

**Postal or Zip Code of Mailing Address::**

F-75013